

<b>Course Title:</b>	<b>Rheumatology</b>
<b>Instructor of Record:</b>	<b>Peter B. Dane, D.O.</b>
<b>Credit Hour:</b>	<b>3 credit hours per week</b>
<b>Rotation Length:</b>	<b>2 – 4 weeks</b>
<b>Prerequisites:</b>	<b>Successful completion of the 6-week Family Medicine Clerkship</b>

### **Syllabus Components**

1. Rotation Description, Purpose and Philosophy
2. Rotation Objectives
3. Orientation to Rotation
4. Required Activities and Assignments
5. Student Performance Evaluation
6. Recommended Resources
7. Standards of Professional Conduct
8. Tips for Successfully Completing the Rotation

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## OU-COM Syllabus Template

### 1. Rotation Description, Purpose, and Philosophy

The purpose of this rotation is to provide the student with the opportunity to enhance his/her knowledge and skills to a level appropriate for a beginning PGY 1 trainee. To accomplish this, the rotation provides a broad overview of Rheumatology. In ambulatory setting, the student is expected to encounter a variety of experiences in those areas traditionally identified with this specialty/area of study. To achieve rotation objectives, the student is encouraged to apply the concepts of diagnosis and management to the patient and, if relevant, develop a working knowledge of both inpatient and outpatient treatment modalities. Throughout the rotation, students should have multiple opportunities to observe and in some cases to perform procedures and to practice problem-solving skills.

### 2. Rotation Objectives

Learning objectives for this rotation should guide the student's learning activities and serve as a baseline for assessment of the student's enhanced knowledge, skills, and professional behavior.

#### Rotation Objectives: Knowledge Domain

1. Describe Classification Criteria and Clinical Features of various Connective tissue diseases (RA, SLE, Sjögren's Syndrome, Scleroderma, Ploymyositis/Dermatomyositis/Inclusion Body Myositis, Overlap Syndrome including Mixed Connective tissue disease, Polymyalgia Rheumatica.)
2. Describe Classification Criteria and Clinical Features of Seronegative Spondyloarthropathies (Ankylosing Spondylitis, Psoriatic Arthritis, Reiter's Syndrome, Arthritis associated with Inflammatory Bowel Disease)
3. Discuss current treatment options for Rheumatoid Arthritis
4. Recognize Clinical Presentations, Pathophysiology and Rationale of Treatment of Common Crystal Arthropathies (Gout, Pseudogout)
5. Describe clinical features and treatment options of Osteoarthritis.
6. Describe diagnostic criteria (including interpretation of DXA results), Clinical Features and Treatment options of Osteoporosis.
7. Describe clinical features and discuss various treatment options of Fibromyalgia
8. Recognize physical examination findings of following Non-Articular and Regional Musculoskeletal disorders that differentiate them from systemic inflammatory conditions  
(Tendinitis, Bursitis, Enthesitis, Carpal Tunnel/Cubital Syndrome)
9. Differentiate between inflammatory and non-inflammatory back pain and list various causes in each category.
10. Classification Criteria of important Vasculitides (Temporal Arteritis, Takayasu's Arteritis, PAN, Wegener's Granulomatosis, Hypersensitivity Vasculitis, Cryoglobulinemic vasculitis)

#### Rotation Objectives: Clinical Skills Domain

During this elective rotation, the student is expected to develop her/his competencies in the following clinical skills. (Please identify up to ten skills or procedures that would be most beneficial for the student's medical education. please designate the expected level of student engagement in the skills being developed: Observe (O), Assist (A), Master (M).

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1. Rheumatologic history: understand principles and assist in obtaining a clinical history, relevant review of systems, and functional status of patients with rheumatic disease symptoms (A).
2. Physical examination: understand principles and demonstrate competency in performing and interpreting the examination of the structure and function of all axial and peripheral joints, periarticular structures, peripheral nerves, and muscles. Additionally, the student should be able to identify extraarticular findings that are associated with specific rheumatic diseases (M).
3. Diagnostic Arthrocentesis: understand the anatomy, precautions including OSHA requirements, and potential sequelae of arthrocentesis and observe and assist in the procedure of obtaining synovial fluid from diarthroidal joints, bursae, and tenosynovial structures (A).
4. Therapeutic aspiration and injection: understand the anatomy, precautions, and potential sequelae of and assist in and if circumstances permit, perform the therapeutic aspiration and/or injection of diarthroidal joints, bursae, tenosynovial structures, trigger points and entheses (A and M).
5. Learn to interpret the results of various laboratory test used in rheumatology (including but not limited to): sedimentation rate, C-reactive protein, rheumatoid factor, antinuclear antibodies, anti ds DNA, anti SS-A/Ro, anti SS-B/La, anti UI RNP, anti Sm, antiribosomal P, anticentromere, antitopoisomerase 1, anti-Jo-1, anti PM-Scl, antineutrophil cytoplasmic antibodies, cryoglobulins, complement component levels, CH50, serum protein electrophoresis, lupus anticoagulant, anticardiolipin antibodies, HLA typing (e.g., HLA B27), antihistone antibodies, ASO and other streptococcal antibody tests, Lyme serologies, serum and urine uric acid levels (M).
6. Plain radiographs: demonstrate basic understanding of radiographs of normal and diseased joints, bones, and periarticular structures (M).
7. Demonstrate the ability, appropriate for the level of training of the individual, to construct a differential diagnosis in patients presenting with signs and symptoms related to rheumatologic diseases and to outline further testing necessary to establish the correct diagnosis (M).
8. Pharmacology: for each medication, understand the dosing, pharmacokinetics, metabolism, mechanisms of action, side effects, drug interactions, compliance issues, costs, and use in patients including fertile, lactating, and pregnant women, patients with heart or chronic renal or liver disease (M).

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- A. Nonsteroidal anti-inflammatory drugs including Coxibs
  - B. Glucocorticoids: topical, intraarticular, systemic
  - C. Systemic antirheumatic drugs: antimalarials, sulfasalazine, methotrexate, Leflunomide
  - D. Immunomodulators: biologics (anti-TNF, B-cell depleting agents, T-cell inhibitors)
  - E. Hypouricemic drugs: allopurinol, sulfinpyrazone, probenecid
9. Demonstrate the ability to identify physical impairment; relate the impairment to the observed functional deficits (M).
10. Psychosocial aspects: understand the impact that the following factors have on the overall therapy of a patient with rheumatic disease and demonstrate knowledge of what can be done to assist a patient in these areas (M).
- (1) Psychologic and emotional factors
  - (2) Economic and vocational issues: vocational rehabilitation, costs of therapy and monitoring
  - (3) Compliance issues

### 3. Orientation to the Rotation

The rotation orientation provides an opportunity to set/clarify expectations, answer questions and define roles, assess skill level and experience, , and anticipate and proactively resolve problems. The student should try to meet with the preceptor either prior to or early on the first day of the rotation. S/he should be prepared to share past clinical experiences and personal objectives for this rotation with the preceptor Clarifying the following details with the preceptor will help to ensure a rewarding and successful rotation:

- a. Specific student responsibilities on the service.
- b. Specific preceptor expectations of the student on the service.
- c. Goals, objectives, structure and expected measurable outcomes of the rotation.
- d. Required rotation assignments and responsibilities in the preceptor's practice (e.g. clinics, lectures, conferences, other didactics, journal clubs, rounds, office hours, morning report).
- e. During this orientation, the student and preceptor should negotiate specific times (e.g. mid-rotation.) when feedback on student performance will be provided. Discuss the evaluation of Student Clinical Performance form.

### 4. Required Learning Activities, Assignments, and Responsibilities

Satisfactory completion of the following activities is required to receive credit for this rotation:

- a. Attendance and participation in all didactic activities, such as lecture presentations, clinical case conferences, workshops, seminars, or professional development activities assigned by the CORE Assistant Dean.
- b. Submission of the rotation preceptors' completed written evaluation within 2 weeks of the end of the rotation.
- c. Submission of the online Student Rotation Evaluation through New Innovations.

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- d. Fulfillment of all required responsibilities identified by the preceptor during orientation.
- e. Achievement of a passing grade on the post-rotation exam, or submission of a 1 -2 page summary description of how the student met the established objectives.

### 5. Student Performance Evaluation

A student's grade for this rotation will be based on completion of all assignments and the following criteria.

#### The Preceptor's Written Evaluation

A student must receive a passing grade from the preceptor in order to pass the rotation. If the preceptor considers the student's progress to be *Marginal*, then a remediation recommendation will be developed by the CORE Assistant Dean, in consultation with the preceptor, and submitted to the Associate Dean for Pre-Doctoral Education for approval. If the preceptor fails the student, the student is awarded a grade of "F" for the rotation regardless of the grade s/he received on the post-rotation exam. The failure report must be forwarded to the Associate Dean for Pre-Doctoral Education and to the Committee on Student Progress (CSP).

### 6. Recommended Resources

(Please identify resources recommended for this rotation.)

1. Primer on The Rheumatic Diseases
2. Kelley's Textbook of Rheumatology
3. Up-to-Date in Rheumatology

#### The following have been identified as resources for **ALL** rotations by CORE preceptors.

Cooper, D., H, Krainik, A., J., & Lubner, S., J. (2007). *The Washington manual of medical therapeutics*. (32nd ed.). Philadelphia: Lippincott Williams & Wilkins.

McPhee, S., J., Papadakis, M., A., & Tierney, L., M. (2007). *2007 Current medical diagnosis and treatment*. New York: McGraw-Hill. Also available on AccessMedicine

Ward, R. (2003). *Foundations for osteopathic medicine* (2nd ed.). Philadelphia: Lippincott Williams & Wilkins.

Medical Dictionary (Dorland or Taber)

CORE OMM Curriculum for Students and Interns. Materials available through CORE Office

PubMed ([www.pubmed.gov](http://www.pubmed.gov)) or

PubMed configured to show OU resources

(<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?myncbishare=oucom>) or

Medline available through OhioLINK (<http://rave.ohiolink.edu/databases/login/medl>)

National Guideline Clearing House (<http://www.guideline.gov/>)

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AccessMedicine available to OU students at: [http://www.library.ohiou.edu/cgi-bin/redir\\_athensonly.pl?http://www.accessmedicine.com/](http://www.library.ohiou.edu/cgi-bin/redir_athensonly.pl?http://www.accessmedicine.com/)

Evidence-Based Medicine Resources available on OU-COM home page via Current Student dropdown menu:

Cochrane Library  
InfoPOEMs/InfoRetriever

MD Consult (Available to COM students for \$25 fee through Office of Academic Affairs/Pre-Doctoral Education)

### **7. Standards of Professional Conduct**

The OU-COM Honor Code applies to all activities in the CORE as well as on the Athens campus.

“As a member of the medical profession, I will maintain the highest standards of academic and personal behavior. As a medical student I will not cheat or plagiarize or tolerate that behavior in others.” OU-COM Honor Code

Students are encouraged to study together and to share their knowledge freely with one another during the learning process. During examinations, however, no assistance from other students or from outside sources is allowed, unless explicitly permitted by the CORE office. Books, notes, and other materials must be left at the periphery of the testing area during examinations.

Professional standards required of a member of the Osteopathic profession are a requirement for passing this rotation, as is compliance with the professional standards of the hospital and outpatient offices of the student’s preceptor. Students are expected to maintain high professional standards of behaviors. They should exhibit such personal characteristics as honesty and integrity, as well as to maintain patient confidentiality at all times.

Unprofessional behavior may result in a failing grade in this rotation, regardless of other academic performance on this rotation, and could subject the student to dismissal from the hospital in which they are based. Professional conduct shall be evaluated by the CORE Assistant Dean through observation of and interaction with the student, his/her preceptor, other hospital attending physicians and staff.

### **8. Tips for Successfully Completing the Rotation**

Being successful on this rotation requires you to be a proactive student. Taking an interest in the specialty and becoming an active team member of the service is critical to learning in a clinical setting. Remember, the clinical learning environment differs from the classroom. You will be “thinking on your feet” and “learning as you go.” To capitalize on “the learning moment,” seek out opportunities to ask questions and speak up appropriately.

In addition, be sure to:

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1. review the syllabus to ensure that you understand all requirements.
2. discuss with your preceptor your previous clinical experiences and personal goals and objectives for this rotation. The rotation orientation is an opportune time to initiate this discussion and to develop positive rapport with you preceptor.
3. clarify your preceptor's expectations of your activities.
4. complete your skills and procedure log as you proceed through the rotation; avoid procrastinating until the end.
5. come prepared to take advantage of the opportunities this rotation has to offer.

*If you have any questions, contact your CORE Administrator or CORE Assistant Dean.*